

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request:	2 Serial/Patent #	10/519739		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
Filing				\$
Amendment				\$
Extension of Time				\$
Notice of Appeal/Appeal				\$
Petition				\$
Issue				\$
Cert of Correction/Terminal Disc.				\$
Maintenance				\$
Assignment				\$
Other				\$
		7 TOTAL AMOUNT OF REFUND	\$	
10 REASON:		8 TO BE REFUNDED BY:		
Overpayment		Treasury Check		
Duplicate Payment		Credit Deposit A/C #:		
No Fee Due (Explanation):		9	_____	
11 REFUND REQUESTED BY:		TITLE: _____		
TYPED/PRINTED NAME: _____		PHONE: _____		
SIGNATURE: _____				
OFFICE: _____		*****		
THIS SPACE RESERVED FOR FINANCE USE ONLY:		Refn. Ref: 06/23/2005 PKIDWELL 0017125100 DNN:300320 Name/Number:10519739 FC: 9204 \$250.00 CR		
APPROVED: _____		DATE: _____		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance
Refund Branch
Crystal Park One, Room 802B